Public Laws: Senate/Bills/ 110th Congress/2nd Session/2008

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110TH CONGRESS
2D SESSION

S. 2708

To amend the Public Health Service Act to attract and retain trained health care professionals and direct care workers dedicated to providing quality care to the growing population of older Americans.

IN THE SENATE OF THE UNITED STATES

MARCH 5, 2008

Mrs. BOXER introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

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A BILL

To amend the Public Health Service Act to attract and retain trained health care professionals and direct care workers dedicated to providing quality care to the growing population of older Americans.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Caring for an Aging America Act of 2008".

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) The projected growth in the number and proportion of older adults is unprecedented in United States history.

(2) By 2030, the population of the United States aged 65 and older will exceed 70,000,000, about twice the number of such individuals in 2000.

(3) In the December 2007 final report titled "From Isolation to Integration: Recommendations to Improve Quality in Long-Term Care" the National Commission for Quality Long-Term Care reported that there is abundant evidence that the health and long-term care workforce is not equipped in skills or in numbers to respond adequately to the aging of the United States population.

(4) Inadequate training in geriatrics and gerontology often results in misdiagnoses, medication errors, inappropriate services, and a lack of care coordination, particularly in transitions from one setting to another, that are harmful to older patients and costly to our health and long-term care system.

(5) Twenty-five percent of medical students report inadequate amounts of time devoted to geriatric training, 30 percent feel unprepared to care for older adults in acute care settings, and 42 percent

say they are unprepared to care for frail older people in nursing homes.

(6) Only 3 percent of psychologists view geriatrics as their primary area of practice and only 28 percent of psychologists have some graduate training in geriatrics or gerontology.

(7) Less than 1 percent of nurses are certified gerontological nurses and only 3 percent of advance practice nurses specialize in aging.

(8) Only 5 percent of social workers are trained in aging issues, yet 70 percent of licensed clinical social workers have worked in some capacity with older adults and their families.

(9) By 2050, the United States will need three times as many direct care workers in home, community-based and facility-based long-term care settings as are employed now to meet the needs of the baby boom generation.

SEC. 3. GERIATRIC AND GERONTOLOGY LOAN REPAYMENT PROGRAM.

Part E of title VII of the Public Health Service Act (42 U.S.C. 295 et seq.) is amended by adding at the end the following:

1 **"Subpart 3—Strengthening Recruitment and**
2 **Retention for Geriatric Care Practice**

3 **"SEC. 771. GERIATRIC AND GERONTOLOGY LOAN REPAY-**
4 **MENT PROGRAM.**

5 "(a) ESTABLISHMENT.—The Secretary shall estab-
6 lish a Geriatric and Gerontology Loan Repayment Pro-
7 gram within the Health Resources and Services Adminis-
8 tration to ensure an adequate supply of physicians, physi-
9 cian assistants, nurse practitioners, clinical nurse special-
10 ists, psychologists, and social workers trained in geriatrics
11 or gerontology and to reduce critical workforce shortages
12 in geriatric care practice.

13 "(b) CONTRACTS.—Under the program established
14 under subsection (a), the Secretary shall enter into con-
15 tracts with individuals described in subsection (d) under
16 which the individuals agree to provide full-time clinical
17 practice and service to older adults for a minimum of 2
18 years.

19 "(c) PAYMENT FOR YEARS OF SERVICE.—In consid-
20 eration of the Federal Government agreeing to pay, for
21 each year of service under a contract under this section,
22 not more than $35,000 of the principal and interest of
23 the educational loans of the individual involved for each
24 of the first 2 years of service, the individual shall carry
25 out activities in accordance with subsection (d)(4). For
26 subsequent years, loan repayments of up to $40,000 per

1 year for a third or fourth year of service may be made
2 available.
3 "(d) ELIGIBLE INDIVIDUALS.—An individual de-
4 scribed in this subsection is an individual—
5 "(1) who—
6 "(A) is a physician, including an osteo-
7 pathic physician, who has completed specialty
8 training in geriatric medicine or geriatric psy-
9 chiatry;
10 "(B) is a nurse practitioner or clinical
11 nurse specialist who has completed specialty
12 training in geriatrics or gerontology;
13 "(C) is a physician assistant who has com-
14 pleted specialty training in geriatrics;
15 "(D) is a social worker who has completed
16 specialty training in gerontology;
17 "(E) is a psychologist who has completed
18 specialty training in gerontology; or
19 "(F) otherwise—
20 "(i) has a degree in medicine, osteo-
21 pathic medicine, clinical or counseling psy-
22 chology (doctoral degree program), social
23 work (master's or doctoral degree pro-
24 gram), or who is a certified nurse practi-

1 tioner, certified clinical nurse specialist, or
2 physician assistant; and
3 "(ii) is enrolled in, or has successfully
4 completed, an accredited program of spe-
5 cialty training in geriatric medicine, geri-
6 atric psychiatry, geropsychology, geronto-
7 logical social work, gerontological nursing,
8 or equivalent geriatric care practice (as de-
9 termined by the Secretary);
10 "(2) who has obtained an educational loan for
11 costs associated with graduate training in medicine,
12 psychology, or social work, or costs associated with
13 becoming a nurse practitioner, clinical nurse spe-
14 cialist, or physician assistant;
15 "(3) who is appropriately licensed, without re-
16 striction (as determined by the Secretary), in the
17 State in which the individual practices; and
18 "(4) who agrees to provide clinical services to
19 older adults for a period of not less than 2 years in
20 a setting determined appropriate by the Secretary.
21 "(e) APPLICABILITY OF CERTAIN PROVISIONS.—
22 With respect to the National Health Service Corps Loan
23 Repayment Program established in subpart III of part D
24 of title III of this Act, the provisions of such subpart shall,
25 except as inconsistent with this section, apply to the pro-

1 gram established in this section in the same manner and
2 to the same extent as such provisions apply to the Na-
3 tional Health Service Corps Loan Repayment Program.
4 "(f) NATIONAL ADVISORY COUNCIL ON THE GERI-
5 ATRIC AND GERONTOLOGY LOAN REPAYMENT PRO-
6 GRAM.—
7 "(1) ESTABLISHMENT.—The Secretary shall es-
8 tablish a National Advisory Council on the Geriatric
9 and Gerontology Loan Repayment Program (re-
10 ferred to in this section as the 'Council') that shall
11 be composed of not to exceed 11 members to be ap-
12 pointed by the Secretary.
13 "(2) DUTIES.—The Council shall consult with,
14 advise, and make recommendations to the Secretary
15 with respect to the Secretary's administration of the
16 program established under subsection (a).
17 "(3) ADMINISTRATIVE PROVISIONS.—Members
18 of the Council shall be appointed for a term of 3
19 years and shall be representative of the health pro-
20 fessions, and professional associations, that are eligi-
21 ble to enter into agreements under this section.
22 "(g) REPORTS.—Not later than 2 years after the date
23 of the enactment of this section, and annually thereafter,
24 the Secretary shall prepare and submit to the appropriate
25 committees of Congress a report that describes—

"(1) the program established under this section (including the number and amount of loan repayments, the number and practice locations of the loan repayment recipients, the demographics of the individuals participating in the program, the default rate and actions required upon default, and to the extent that it can be determined, the reasons for such defaults);

"(2) how the program interacts with other Federal loan repayment programs for primary health care professionals; and

"(3) the overall costs and benefits of the program.

"(h) DEFINITION.—In this section:

"(1) GERIATRICS.—The term 'geriatrics' means the branch of medicine that deals with the problems and diseases of older adults and aging.

"(2) GERONTOLOGY.—The term 'gerontology' means the multidisciplinary study of the aging process and individuals as they grow from middle age through later life. Such term encompasses the social, psychological, biological and economic aspects of aging.

"(3) SPECIALTY TRAINING.—The term 'specialty training' means coursework in geriatrics and

gerontology and clinical training, including internships or fellowships, in a geriatric setting.

"(i) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section, $4,000,000 for fiscal year 2009, $9,500,000 for fiscal year 2010, $16,000,000 for fiscal year 2011, $24,000,000 for fiscal year 2012, and $30,500,000 for fiscal year 2013.".

SEC. 4. EXPANSION OF NURSING EDUCATION LOAN REPAYMENT PROGRAM.

Section 846 of the Public Health Service Act (42 U.S.C. 297n) is amended—

(1) by redesignating subsection (i) as subsection (j); and

(2) by inserting after subsection (h), the following:

"(i) GERIATRIC CARE PRACTICE IN LONG-TERM CARE SETTINGS.—

"(1) LOAN REPAYMENTS.—In providing for loan repayments under this section, the Secretary shall ensure that eligible individuals include registered nurses who complete specialty training in geriatrics or gerontology and who elect to provide nursing services to older adults in home and community-based or facility-based long-term care settings,

1 or any other program determined appropriate by the
2 Secretary.
3 "(2) DEFINITION.—In this subsection, the term
4 'specialty training' means coursework in geriatrics
5 and gerontology and clinical training, including in-
6 ternships or fellowships, in a geriatric setting.
7 "(3) AUTHORIZATION OF APPROPRIATIONS.—
8 There is authorized to be appropriated to carry out
9 this subsection, $1,500,000 for fiscal year 2009,
10 $3,000,000 for fiscal year 2010, $5,000,000 for fis-
11 cal year 2011, $7,000,000 for fiscal year 2012, and
12 $8,500,000 for fiscal year 2013.".
13 **SEC. 5. EXPANSION OF CAREER LADDER PROGRAMS.**
14 Section 831 of the Public Health Service Act (42
15 U.S.C. 296p) is amended—
16 (1) in subsection (c)(1)(A)—
17 (A) by striking "to promote career" and
18 inserting the following: "to—
19 "(i) promote career"; and
20 (B) by adding at the end the following:
21 "(ii) focus on specialty training in
22 providing long-term care services for nurs-
23 ing personnel (including registered nurses,
24 licensed practical nurses, licensed voca-
25 tional nurses, certified nurse assistants,

1 home health aides, personal care attend-
2 ants, or any other related worker category
3 designated by the Secretary) who provide
4 services in home and community-based or
5 facility-based long-term care settings;
6 and"; and
7 (2) in subsection (h), by adding at the end the
8 following: "There is authorized to be appropriated
9 for grants under subsection (c)(1)(A)(ii), $4,000,000
10 for fiscal year 2009, $4,000,000 for each of fiscal
11 years 2010 through 2012, and $3,500,000 for fiscal
12 year 2013.".

13 **SEC. 6. HEALTH AND LONG-TERM CARE WORKFORCE ADVI-**
14 **SORY PANEL FOR AN AGING AMERICA.**

15 Subpart 3 of part E of title VII of the Public Health
16 Service Act (as added by section 2) is further amended
17 by adding at the end the following:

18 **"SEC. 772. HEALTH AND LONG-TERM CARE WORKFORCE**
19 **ADVISORY PANEL FOR AN AGING AMERICA.**

20 "(a) ESTABLISHMENT.—The Secretary, in consulta-
21 tion with the Secretary of Labor, shall establish a Health
22 and Long-Term Care Workforce Advisory Panel (referred
23 to in this section as the 'Panel') to—
24 "(1) examine workforce issues related to health
25 and long-term care for the aging population; and

1 "(2) provide advice to each such Secretary and
2 to the appropriate committees of Congress con-
3 cerning workforce issues related to health and long-
4 term care for the aging population.
5 "(b) MEMBERSHIP.—The Panel shall be composed of
6 not to exceed 20 individuals to be appointed by the Sec-
7 retary.
8 "(c) DUTIES.—The Panel shall—
9 "(1) analyze the existing geriatric health and
10 long-term care workforce data infrastructure;
11 "(2) make recommendations for new or addi-
12 tional uniform data elements across regions and
13 States that is necessary to track supply, demand,
14 and workforce shortages related to health and long-
15 term care for the aging population;
16 "(3) conduct a research project to identify in-
17 centives for recruitment and retention of new popu-
18 lations of clinicians and providers who agree to serve
19 vulnerable older adults in geriatric and long-term
20 care settings and make recommendations for one or
21 more demonstrations, including the design, imple-
22 mentation and evaluation of outcomes; and
23 "(4) carry out other activities determined ap-
24 propriate by the Secretary.

1 "(d) FOCUS OF RESEARCH PROJECT.—In carrying
2 out the research project under subsection (c)(3), the Sec-
3 retary in consultation with the Panel shall focus on indi-
4 viduals who are not otherwise eligible for loan repayment
5 incentives under this title or title VIII, such as retired
6 military clinicians or other retired health professionals,
7 health care professionals seeking a mid-career change, and
8 direct care workers in long-term care settings. To carry
9 out such research project, the Secretary may award grants
10 or contracts. Eligible entities shall include State or local
11 government, health professions schools, academic health
12 centers, and other appropriate public or private non-profit
13 entities.

14 "(e) ADMINISTRATIVE PROVISIONS.—Members of the
15 Panel shall be appointed for a term of not to exceed 3
16 years (as determined by the Secretary at the time of ap-
17 pointment), shall convene at least twice per year, and shall
18 be representative of diverse public and private sector ex-
19 pertise and interests, including representation from the
20 Department of Health and Human Services (including the
21 Health Resources and Services Administration, the Agen-
22 cy for Healthcare Research and Quality, and the Adminis-
23 tration on Aging), the Department of Labor (including the
24 Bureau of Labor Statistics, the Employment and Training
25 Administration, and the Employment Standards Adminis-

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1 tration), other Federal officials as the Secretary deter-
2 mines appropriate, academic institutions, consumer orga-
3 nizations, national aging advocates, health professional
4 and paraprofessional associations, organized labor, nation-
5 ally-recognized researchers in the area of geriatric care
6 and long-term care workforce issues, health care and long-
7 term care associations (including those representing home
8 and community-based and facility-based settings), and pri-
9 vate foundations that have sponsored initiatives to expand
10 health professionals to care for the aging population.

11 "(f) REPORTS.—Not later than 2 years after the date
12 of enactment of this section, and every 2 years thereafter,
13 the Secretary, based on the advice and recommendations
14 of the Panel, shall submit to the appropriate committees
15 of Congress a report on the status of the health profes-
16 sions and long-term care workforce for the aging popu-
17 lation.

18 "(g) AUTHORIZATION OF APPROPRIATIONS.—There
19 is authorized to be appropriated to carry out this section,
20 $1,500,000 for fiscal year 2009, and such sums as may
21 be necessary for each of fiscal years 2010 through 2013.".

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